Recipient Committee					COVER PAGE	
Campaign Statement Cover Page	Type or print in	ı ink.	Date Stamp	FORM		
(Government Code Sections 84200-84216.5)			FORWE	Page	1 of 16	
	Statement covers period	Date of election if applicable: (Month, Day, Year)	Alb Personal	Page	For Official Use Only	
	from07/01/2011		OIZ JAN 10 FM	1:58		
SEE INSTRUCTIONS ON REVERSE	through12/31/2011	06/05/2012	And the following in the state of the state	£ "		
1. Type of Recipient Committee: All Committees - Co	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:				
✓ Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	rimarily Formed Ballot Measure ommittee) Controlled) Sponsored //so Complete Part 6) rimarily Formed Candidate/ fficeholder Committee //so Complete Part 7)	☐ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 Te	,	Quarterly State Special Odd-Y Supplemental Statement - At	⁄ear Report	
	. NUMBER 336959	Treasurer(s)				
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Reelect Pat Furey for the Torrance City Council -	2012	NAME OF TREASURER Patrick J. Furey MAILING ADDRESS				
STREET ADDRESS (NO P.O. BOX)		CITY	STATE	710.0005	1951 0005/91/01/5	
		Torrance	Ca	ZIP CODE 90504	AREA CODE/PHONE	
CITY STATE ZIP CO	DE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR		00004	010	
Torrance Ca 90504	310-	Teresa K. Furey				
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO	ox .	MAILING ADDRESS	_			
PO Box 6101 CITY STATE ZIP CO	1954 2095					
Torrance Ca 90504	DE AREA CODE/PHONE 310	CITY	STATE	ZIP CODE	AREA CODE/PHONE	
OPTIONAL: FAX / E-MAIL ADDRESS	310-	Torrance OPTIONAL: FAX / E-MAIL ADDRI	Ca	90504	310-	
Pat@CouncilmanPatFurey.com		Info@CouncilmanPatFu				
. Verification					·	
I have used all reasonable diligence in preparing and reviewing	this statement and to the b			:hedules is true	and complete. I certify	
under penalty of perjury under the laws of the State of California	that the foregoing is true a				•	
Executed on Tany 10, 2012	Ву					
Executed on Throng 10, 2012	Ву			onsor		
Executed on	Ву					
Date	-,	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent			
Executed on	Ву	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent			

COVER PAGE - PART 2							
CALIFORNIA FORM	460						

Page ____ of ______

. Officeholder or Candidate Controlled	Committee	6.	Primarily Formed Ballo	t Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
Pat Furey						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AN	D DISTRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	N	SUPPORT OPPOSE
Torrance City Council						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STRE			Identify the controlling office	ceholder, car	ndidate, or state measu	re proponent, if any
	Torrance Ca 90504		NAME OF OFFICEHOLDER, CANI	DIDATE OR PR	OPONENT	-
Related Committees Not Included in t not included in this statement that are controlled contributions or make expenditures on behalf of	by you or are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT N	O. IF ANY
COMMITTEE NAME	I.D. NUMBER					
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Cand officeholder(s) or candidate(s)			
	YES NO			TOT WINCH UNI	s committee is primarily it	imea.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE
CITY STATE	ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER					
			NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (N	IO P.O. BOX)					
CITY STATE	ZIP CODE AREA CODE/PHONE		Attaci	n continuatio	on sheets if necessary	

Campaign Disclosure Statement Summary Page

18. Cash Equivalents See instructions on reverse \$

19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$

Type or print in ink. Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE		thro	ugh12/31/2011	Page 3 of 16
NAME OF FILER Pat Furey				I.D. NUMBER
Contributions Received	Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE		1336959 mmary for Candidates he State Primary and
 Monetary Contributions Loans Received Schedule A, Line 3 Loans Received Substitutions Add Lines 1 + 2 Nonmonetary Contributions Schedule C, Line 3 TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 	\$ 10000 \$ 19529 1000	\$ 9529 15000 \$ 24529 1000 \$ 25529	0 1/1 9 20. Contributions Received \$ 21. Expenditures	through 6/30 7/1 to Date \$\$
Expenditures Made 6. Payments Made Schedule E, Line 4 7. Loans Made Schedule H, Line 3 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 10. Nonmonetary Adjustment Schedule C, Line 3 11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 5186 0 0	\$ 5186	Candidates 22. Cumulati (If Subject) Date of Election (mm/dd/yy)	Summary for State ive Expenditures Made* to Voluntary Expenditure Limit) Total to Date
Current Cash Statement 12. Beginning Cash Balance	19529 0 5186 \$ 17469	To calculate Column B, a amounts in Column A to to corresponding amounts from Column B of your la report. Some amounts in Column A may be negatifigures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, or carry over the amounts from Lines 2, 7, and 9 (if	*Amounts in this section reported in Column B. section reported in Column B.	\$may be different from amounts

any).

0

15000

Schedule A Monetary Contributions Received

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A

CALIFORNIA ACO

Statement covers period

				from07/0	1/2011	FOR	RM TOO
SEE INSTRUCTIO	NS ON REVERSE			through12/	31/2011	Page	4 of 16
NAME OF FILER						I.D. NUME	BER
-						1336959)
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
08/20/2011	Smile Cleaners 18270 Prairie Avenue Torrance, Ca 90504	□IND □COM ☑OTH □PTY □SCC		100	1	00	100
08/20/2011	Coin Laundry and Water 18240 Prairie Avenue Torrance, Ca	□IND □COM ☑OTH □PTY □SCC		100	1	00	100
08/22/2011	Ken Miller Torrance, Ca 90501	☑IND □COM □OTH □PTY □SCC	Retired	100	1	00	100
08/23/2011	Robert Van Lingen Torrance, Ca 90505	☑IND □COM □OTH □PTY □SCC	Van Lingen Towing	150	1	50	150
09/01/2011	Tom & Gerry Rische Torrance, Ca 90505	☑IND □COM □OTH □PTY □SCC	Retired	100	1	00	100
			SUBTOTAL	\$ 550.00			
 Amount rec (Include all Amount rec Total monet 	A Summary ceived this period – itemized monetary contributions. Schedule A subtotals.) ceived this period – unitemized monetary contributions tary contributions received this period.	s of less than \$	\$100\$	3880	IND – COM- OTH - PTY –	- Other (e.g Political Pa	Committee in PTY or SCC) g., business entity)
(Add Lines	1 and 2. Enter here and on the Summary Page, Colu	mn A, Line 1.)	TOTAL \$			EDDC Ea	rm 460 (lanuary(05)

Schedule A Monetary Contributions Received

Type or print in ink.

Amounts may be rounded to whole dollars.

			Λ
CH			

Statement covers period

		to whole donars.		from07/0	1/2011	FORM 46U	
SEE INSTRUCTIO	DNS ON REVERSE			through12/	31/2011	Page	5 of 16
NAME OF FILER Pat Furey						I.D. NUMBE	ER .
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	AR	PER ELECTION TO DATE (IF REQUIRED)
08/20/2011	Smile Cleaners 18270 Prairie Avenue Torrance, Ca 90504	□IND □COM ☑OTH □PTY □SCC		100	10	00	100
08/20/2011	Coin Laundry and Water 18240 Prairie Avenue Torrance, Ca	□IND □COM ☑OTH □PTY □SCC		100	10	00	100
08/22/2011	Ken Miller Torrance, Ca 90501	☑IND □COM □OTH □PTY □SCC	Retired	100	10	00	100
08/23/2011	Robert Van Lingen Torrance, Ca 90505	☑IND □COM □OTH □PTY □SCC	Owner - Van Lingen Towing	150	15	50	150
09/01/2011	Tom & Gerry Rische Torrance, Ca 90505	☑IND □COM □OTH □PTY □SCC	Retired	100	10	00	100
			SUBTOTALS	550.00			
 Amount red (Include all Amount red Total mone 	A Summary ceived this period – itemized monetary contributions. Schedule A subtotals.) ceived this period – unitemized monetary contributions tary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colu	s of less than \$	\$100\$	3880	IND - Ir COM - OTH - PTY - I	Other (e.g Political Par	Committee 1 PTY or SCC) ., business entity)
(/ tad Ellics	Tana 2. Enter here and on the Summary rage, Colu	1101 A, LINE 1.)				EPPC For	rm 460 (January/05)

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Type or print in ink.

Amounts may be rounded

SCHEDU	JLE A (CONT
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CALIFORNIA 4

Statement covers period

		to whole o	dollars.	from07/01	/2011	FORM 46U			
				through12/3	31/2011	Page	6 of 16		
NAME OF FILER						I.D. NUMBE	ER		
Pat Furey					•	1336959			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO [CALENDAR YE, (JAN. 1 - DEC. (AR	PER ELECTION TO DATE (IF REQUIRED)		
09/05/2011	Rosalie Wider Torrance, Ca 90503	☑IND □COM □OTH □PTY □SCC	Engineer Northrup-Gruman	100	100		100		100
09/06/2011	Fred Casstevens Torrance, Ca 90504	☑IND □COM □OTH □PTY □SCC	Retired	100	100		100		
09/09/2011	Surf Management 357 Van Ness Way, Ste. 100 Torrance, Ca 90501	☐IND ☐COM ØOTH ☐PTY ☐SCC		500	50	00	500		
09/15/2011	Chris Angelo Hermosa Beach, Ca 90254	☑IND □COM □OTH □PTY □SCC	Attorney Law Office of Chris Angelo	200	200		200		
09/15/2011	David Shaw Palos Verdes Estates, Ca 90274	☑IND □COM □OTH □PTY □SCC	Owner Dave Shaw Construction	500	50	00	500		
			SUBTOTAL	1400					

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A	

CALIFORNIA 160

Statement covers period

				from07/01	/2011	FORM	400
				through 12/3	1/2011		7_ of <u>16</u>
NAME OF FILER						I.D. NUMBER	3
Pat Furey						1336959	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
09/07/2011	Sam Rindge South Pasadena, Ca 91030	☑IND □COM □OTH □PTY □SCC	Retired	100	. 1	00	100
09/18/2011	Glen Terry Torrance, Ca 90503	☑IND □COM □OTH □PTY □SCC	Retired	300	3	00	300
09/18/2011	Clifford Numark Torrance, Ca 90503	☑IND □COM □OTH □PTY □SCC	Councilman, City of Torrance	250	2	50	250
09/18/2011	Dick Rossberg Redondo Beach, Ca 90277	☑IND □COM □OTH □PTY □SCC	Retired	200	2	00	200
09/18/2011	Alex See Torrance, Ca 90505	☑IND □COM □OTH □PTY □SCC	Engineer ACTA, Inc/	100	1	00	100
			SUBTOTAL	\$ 950			

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Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

				from07/01	/2011	FOF	RM TOO				
				through 12/3	31/2011	raye	8 of 16				
NAME OF FILER						I.D. NUMB	ER				
Pat Furey						1336959)				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)				
09/18/2011	Don Lee 2401 E. El Segundo Blvd., Ste. 400 El Segundo, Ca 90245	☑IND □COM □OTH □PTY □SCC	Trustee - TUSD District Director Farmer's Insurance Co.	100	100		100		100		100
09/18/2011	Francis Beattie Torrance, Ca 90503	☑IND □COM □OTH □PTY □SCC	Retired	100	100		100				
09/18/2011	Jason Scott Wallace PO Box 57935 Sherman Oaks, Ca 91413	☑IND □COM □OTH □PTY □SCC	Attorney County of Los Angeles	100	1	00	100				
09/18/2011	Terry Ragins Torrance	☑IND □COM □OTH □PTY □SCC	Trustee - TUSD	100	100		100				
xxxx	xxxx	□IND □COM □OTH □PTY □SCC	xxx								
			SUBTOTAL	\$ 400							

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Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

Monetary Contributions Received		to whole o		Statement coverage from07/01	ers period 1/2011	california 460			
				through12/3	31/2011	Page	9_ of 16_		
NAME OF FILER			l_			I.D. NUM	IBER		
Pat Furey						133695	59		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)		
09/18/2011	Bill Sutherland Torrance, Ca 90501	☑IND □COM □OTH □PTY □SCC	Councilman - City of Torrance BS Painting	100	100 10		0 100		100
09/18/2011	Al Muratsuchi Torrance, Ca 90505	☑IND □COM □OTH □PTY □SCC	Trustee - TUSD Attorney - State of California	100		00	100		
09/18/2011	Patrick P. Furey Torrance, Ca 90504	☑IND □COM □OTH □PTY □SCC	CEO - Veritas Campaigns	100	100 100		100		
09/21/2011	Steve Bradford for Assembly c/o Kaufman Legal Group 777 S. Figueroa #4050 LA, Ca 90017	□IND ☑COM □OTH □PTY □SCC	FPPC #1334072	500	5	500	500		
09/22/2011	Arron Mandel Santa Monica, Ca 90405	☑IND □COM □OTH □PTY □SCC	VP - Meta Developers	99	1	49	149		
			SUBTOTAL	\$ 899					

*Contributor Codes

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PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

		to whole dollars.		from 07/01/2011		FORM 460	
				through12/3	31/2011	Page _	10 of 16
NAME OF FILER						I.D. NUM	IBER
Pat Furey						133695	59
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
09/23/2011	Steve Barkan Pasadena, Ca 91101	☑IND □COM □OTH □PTY □SCC	Political Counsultant SG&A Campaigns	100	100 100		100
11/11/2011	Larry Guidi for Mayor 30151 Tomas Rancho Santa Margaritta, Ca 92688	□IND ☐COM □OTH □PTY □SCC	FPPC #1274277	1000	1000 100		1000
12/03/2011	Robert Rudolph Torrance, Ca 90504	☑IND □COM □OTH □PTY □SCC	Owner Network Services	200	200		200
12/28/2011	Leilani A. Kimmel-Dagastino Torrance, Ca 90503	☑IND □COM □OTH □PTY □SCC	Retired	50 149		49	149
12/28/2011	Sam Rindge South Pasadena, Ca 91030	☑IND □COM □OTH □PTY □SCC	Retired	100	2	00	200
			SUBTOTAL	1450			

*Contributor Codes

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(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

HED!		

Schedule B – Part 1 Loans Received
SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Pat Furey
FULL NAME, STREET ADDRESS AND ZIP OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)
Patrick J. Furey
Torrance, Ca 90504
terino com com com com

Type or print in ink. Amounts may be rounded to whole dollars.

Stateme	ent covers period	CALIFORNIA	460
from	07/01/2011	FORM	400
through _	12/31/2011	Page // o	f 16

SEE INSTRUCTIONS ON REVERSE					through12	2/31/2011	Page//	of <u>/6</u>
NAME OF FILER				<u> </u>			I.D. NUMBER	
Pat Furey							1336959	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIO	CLOSE OF THIS	DAID THIS	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Patrick J. Furey Torrance, Ca 90504	Attorney County of Los Angeles			PAID \$ FORGIVEN	0 s5000	O RATE	s 5000	CALENDAR YEAR \$ 5000 PER ELECTION**
[†] ☑ IND □ COM □ OTH □ PTY □ SCC		\$5000	s0	\$	O N/A DATE DUE	s0	02/09/11 DATE INCURRED	\$5000
Patrick J. Furey Torrance, Ca 90504	Attorney County of Los Angeles		. 10000	FORGIVEN	0 s 10000 0 N/A	O RATE	s 10000	s 15000 PERELECTION*
†□ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$ CALENDAR YEAR
				\$ FORGIVEN	_ \$	% RATE	s	\$PER ELECTION **
† IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	s	DATE INCURRED	\$
		SUBTOTALS \$	10000	\$ 	0 \$ 15000			
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		

١.	Loans received this period		\$_	10000
	(Total Column (b) plus unitemized loans of less than \$100.)			
2.	Loans paid or forgiven this period		\$_	0
	(Total Column (c) plus loans under \$100 paid or forgiven.)			
	(Include loans paid by a third party that are also itemized on Schedule A.)			
3.	Net change this period. (Subtract Line 2 from Line 1.)	NET	\$_	10000
	Enter the net here and on the Summary Page, Column A, Line 2.		•	(May be a negative number)

†Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

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SCC - Small Contributor Committee

*Amounts forgiven or paid by another party also must be reported on Schedule A. ** If required.

Schedule C **Nonmonetary Contributions Received**

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE C
Statement covers period	CALIFORNIA 460
from07/01/2011	FORM 40U
through 12/31/2011	Page /2 of /6
	I.D. NUMBER
	1336050

	TIONS ON REVERSE				throu	gh12/31/20	011	Page /	2 of 16
Pat Furey								I.D. NUMB 1336959	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CUMULAT DAT CALENDA (JAN 1 - 1	TE R YEAR	PER ELECTION TO DATE (IF REQUIRED)
09/18/11	ArJay Telecon 23211 Hawthorne Blvd., Suite 300 Torrance, Ca 90505	□IND □COM ☑OTH □PTY □SCC		Fundraiser - Room, Food a Beverages	and	1000		1000	1000
		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC							
Attach add	ditional information on appropriately label	ed continuati	on sheets.	SUBTO	OTAL \$	1000			
Schedule	e C Summary						*Con	tributor Cod	les

1. Amount received this period – itemized nonmonetary contributions.

1000 (Include all Schedule C subtotals.)\$

2. Amount received this period – unitemized nonmonetary contributions of less than \$100\$ ____

3. Total nonmonetary contributions received this period. 1000

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Type or print in ink. Amounts may be rounded

	SCHEDULEE
Statement covers period	CALIFORNIA ACO
from07/01/2011	FORM 400
through12/31/2011	Page/3 of _/6
	I.D. NUMBER
	1336959

Schedule E **Payments Made** to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER Pat Furey **CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. radio airtime and production costs MBR member communications MTG meetings and appearances RFD returned contributions CNS campaign consultants contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CTB CVC civic donations PET petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research ND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services **TSF** transfer between committees of the same candidate/sponsor professional services (legal, accounting) VOT voter registration LEG legal defense PRO LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Torrance Symphony Association PO Box 1581 Torrance, Ca 90505	cvc		200
National Law Enforcement Memorial Fund 901 E Street, NW, Ste. 100 Washington, DC 20004	cvc		200
Veritas Campaigns 2355 Westwood Blvd., Ste. 601 Los Angeles, Ca 90064	CNS		1000

SUBTOTAL \$ 1400 **Schedule E Summary** 5157 2. Unitemized payments made this period of under \$100\$ ______ 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......\$ 5186

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule E (Continuation Sheet)

Type or print in ink. Amounts may be rounded

Statement covers period CALIFORNIA **FORM** 07/01/2011 from Page 14 of 16 12/31/2011 through I.D. NUMBER

to whole dollars. **Payments Made** SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1336959 Pat Furey

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs RFD returned contributions CNS campaign consultants meetings and appearances SAL campaign workers' salaries CTB contribution (explain nonmonetary)* OFC office expenses t.v. or cable airtime and production costs PET petition circulating CVC civic donations TRC candidate travel, lodging, and meals FIL candidate filing/ballot fees PHO phone banks TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research transfer between committees of the same candidate/sponsor TSF independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services ND PRO professional services (legal, accounting) VOT voter registration LEG legal defense PRT print ads WEB information technology costs (internet, e-mail) campaign literature and mailings LIT NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID Office Equipment CompSource (on-line retailer) **OFC** 382.88 Zoomballon fundraiser supplies (on-line retailer) **FND** 80.00 Beymo fundraiser supplies Hawthorne Blvd. **FND** 226.98 Torrance, Ca 90503

Party City fundraiser supplies Hawthorne Blvd. **FND** 40.22 Torrance, Ca 90503

7-11 fundraiser supplies Prairie Blvd. FND Torrance, Ca 90504

SUBTOTAL \$

746.33

16.25

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule E (Continuation Sheet) **Payments Made**

Type or print in ink. Amounts may be rounded to whole dollars.

	SOFIEDOLE E (SOITI.)
Statement covers period	CALIFORNIA 460
from07/01/2011	FORM 400
through 12/31/2011	Page/5 of/6
	I.D. NUMBER
	1336959

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Pat Furey

LIT

MBR member communications RAD radio airtime and production costs CMP campaign paraphernalia/misc. RFD returned contributions CNS campaign consultants MTG meetings and appearances

CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries TEL t.v. or cable airtime and production costs petition circulating CVC civic donations PET

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

TRC candidate travel, lodging, and meals candidate filing/ballot fees PHO phone banks FIL staff/spouse travel, lodging, and meals POL polling and survey research TRS FND fundraising events TSF transfer between committees of the same candidate/sponsor ND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services

VOT voter registration LEG legal defense professional services (legal, accounting) PRO campaign literature and mailings PRT

WEB information technology costs (internet, e-mail) print ads

AMOUNT PAID	DESCRIPTION OF PAYMENT	CODE O	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)
1345.00	d Signs	СМР	Veritas Campaigns 2355 Westwood Blvd., Suite 601 Los Angeles, Ca 90064
2.95	orical News Article	WEB	New Library Article Daily Breeze online
510.74	tage and Campaign PO box	POS	USPS 18080 Crenshaw Blvd. Torrance, Ca 90504
146.81		OFC	Office Depot 19800 Hawthorne Blvd. Torrance, Ca 90503
691.43		LIT	Freeman Public Affairs 1405 Marcelina, Ste. 111 Torrance, Ca 90501
			TOTTATICE, Ca 90501

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

2696.93

Schedule E (Continuation Sheet) **Payments Made**

Type or print in ink. Amounts may be rounded to whole dollars.

Statement covers period **CALIFORNIA FORM** 07/01/2011 from 12/31/2011 through. I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1336959 Pat Furey

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs MBR member communications CMP campaign paraphernalia/misc. RFD returned contributions MTG meetings and appearances CNS campaign consultants SAL campaign workers' salaries office expenses OFC CTB contribution (explain nonmonetary)* t.v. or cable airtime and production costs PET petition circulating TEL CVC civic donations candidate travel, lodging, and meals phone banks РНО candidate filing/ballot fees FIL TRS staff/spouse travel, lodging, and meals polling and survey research POL FND fundraising events transfer between committees of the same candidate/sponsor TSF postage, delivery and messenger services independent expenditure supporting/opposing others (explain)* ND professional services (legal, accounting) VOT voter registration PRO LEG legal defense WEB information technology costs (internet, e-mail) PRT print ads campaign literature and mailings LIT

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Outback Hawthorne Blvd. Torrance, Ca 90503	MTG		138.50
Ralph's 17500 Crenshaw Blvd. Torrance, Ca 90504	FND	fundraiser supplies	68.12
VistaPrint (on-line retailer)	СМР	Campaign Banners	40.41
Keurig (on-line retailer)	OFC	office supplies	55.36
Fry's Electronics Manhattan Beach, Ca	OFC	office supplies	10.86
	- Cohodulo D	SUBTOTA	L \$ 313.25

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

313.25